PATENT APPLICATION FEE DETERMINATION RECORD 09 768 07 2									
CLAIMS AS FILED - PART I SHALL ENTITY OTHER THAN (Column 1) (Column 2) TYPE C OR SHALL ENTITY									
TOTAL CLAIMS 21				RA	TE	FEE	lF	RATE	FEE
FOR	NUMBER FILED	NUMBER EXTRA		BASI	FEE	355.00	OR		710.00
TOTAL CHARGEABLE CLAIMS	21 minus 20: 1		XS	9-		OR	X\$18-	18	
INDEPENDENT CLAIMS	3 minus 3 =	3 minus 3 = 6		×	0=		OR	X80-	
MULTIPLE DEPENDENT CLAIM P	RESENT			41	35=	•	OR	+270=	
* If the difference in column 1 is less than zero, enter "O" in column 2					TAL		OR	TOTAL	728
CLAIMS AS AMENDED - PART II SHALL ENTITY OR SMALL ENTITY									
CLAUS REMAINING AFTER	NEG SER PREV	MEST MBER ROUSLY D.ROR	PRESENT EXTRA	R	NTE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total • V		•) (•	•	X	9=		OR	X\$16-	
Independent · 2	Miras •••	3	•	×	10=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					35-		OR	+270=	
					TOTAL T. FEE		OR	TOTAL ADDIT, FEE	
3-17-05 (Column 1) (5) (Column 2) (Column 3)									
CLAINS REMAINING AFTER	PRE PRE	PREST PARIER PARIONY DROPA DROPA	PRESENT ENTRA	1	ATE	ADDI- TIONAL REE		RATE	ADDI- TIONAL FEE
AMENDMENT		al	.0	[x	\$ 9=		OR	X\$18-	No
Independent • 2	Minus	3	-0	11.	40-	1	OR	X80=	FEE
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					35-	1	OR	+270=	DUE
alph-					TOTA		OR	ADDIT, FEE	10
9 8 0)									
COMMIN 1 COUNS COU	H No PRS	REMEST LAMBER EVIOUSLY NED FOR	PRESENT EXTRA	7 [ATE	ADDI- TIONA FEE		RATE	ADOI- TIONAL FEE
Total · 16	Minus	21	- Ø] [5	39=		OR	X\$18=	1
C · Independent · O	Minus	3	•0] ;	(40=		OR	X80-	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					135-		OR		
" If the only in column 1 is less than the only in column 2, with "I nothern 3.					TOL		-Jos	W.Y.	
"If the entry in column 1 is less than the entry in column 1 is less than 20, enter 20." He Tilghest Number Proviously Paid For IN THIS SPACE is less than 20, enter 20." ADDIT, FEE The Tilghest Number Proviously Paid For IN THIS SPACE is less than 3, enter 20." The Tilghest Number Proviously Paid For IN THIS SPACE is less than 3, enter 20." The Tilghest Number Proviously Paid For IN THIS SPACE is less than 3, enter 20." The Tilghest Number Proviously Paid For IN THIS SPACE is less than 3, enter 20." ADDIT, FEE									

FORM PTO 47

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